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Complete if Known Substitute for form 1449/PTO **Application Number** To be assigned Filing Date 10/30/2003 INFORMATION DISCLOSURE First Named Inventor Clark, Roy STATEMENT BY APPLICANT Art Unit To be assigned (Use as many sheets as necessary) **Examiner Name** To be assigned **Attorney Docket Number** 03-0012

Sheet 1

Examiner	Cite No.1		Publication Date	Name of Patentee or	Pages, Columns, Lines, Where	
Initials*   N		Number-Kind Code <sup>2 (F known)</sup>	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevan Figures Appear	
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Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
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